

MULTIPLE-DEPENDENT CLAIM FEE CALCULATION SHEET (FOR USE WITH FORM PTO-875)				SERIAL NO.	FILING DATE
				10 / 088248	
				APPLICANT(S)	
CLAIMS					
	ALL CLAIMS	AFTER 1st AMENDMENT	AFTER 2nd AMENDMENT		
	IND. DEP.	IND. DEP.	IND. DEP.	IND. DEP.	IND. DEP.
1				51	
2				52	
3				53	
4				54	
5				55	
6				56	
7				57	
8				58	
9				59	
10				60	
11				61	
12				62	
13				63	
14				64	
15				65	
16				66	
17				67	
18				68	
19				69	
20				70	
21				71	
22				72	
23				73	
24				74	1
25				75	
26				76	2
27				77	
28				78	
29				79	
30				80	
31				81	
32				82	
33				83	
34				84	
35				85	
36				86	
37				87	
38				88	
39				89	
40				90	
41				91	
42				92	
43				93	
44				94	
45				95	
46				96	
47				97	
48				98	
49				99	1
50		1		100	
TOTAL IND.				TOTAL IND.	3
TOTAL DEP.				TOTAL DEP.	47
TOTAL CLAIMS				TOTAL CLAIMS	50

PTO-1360 (3-78)

*MAY BE USED FOR ADDITIONAL CLAIMS OR AMENDMENTS

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